

1 June 1993

Medical

QUALIFICATIONS AND DUTIES OF MEDICAL OFFICERS

This regulation establishes policy on qualifications and duties of medical personnel in Civil Air Patrol (CAP).

1. Policy. Medical care in CAP is strictly limited to emergency treatment in life or death situations within the training and qualifications of the individual rendering such treatment until such time that private professional or authorized military medical care can be obtained. CAP medical personnel are responsible for advising CAP commanders and units on the health, sanitation and hygiene of CAP members relevant to CAP activities as outlined in this regulation.

2. Qualification of CAP Medical Officers. In order to be eligible for appointment as a CAP medical officer to a CAP unit, the individual must possess and furnish proof of:

a. One of the following degrees:

(1) Doctor of Medicine from an accredited school of medicine.

(2) Doctor of Osteopathy from an accredited school of osteopathy.

(3) Doctor of Chiropractic from an accredited school of chiropractic.

b. A current license to practice in a state or territory of the United States or in the District of Columbia or be a medical officer on active duty in federal service in any one or more of the categories listed in 2a above.

3. Qualifications of Assistant Medical Officers:

a. Must possess the same qualifications as listed above for medical officers. However, where no qualified medical officer is available, the following personnel may be appointed as assistant medical officer:

(1) Individuals who hold degrees of Doctor of Dentistry from an accredited school and are engaged in the practice of dentistry.

(2) Individuals who hold degrees of Doctor of Optometry from accredited schools and are engaged in the practice of optometry.

(3) Individuals who hold degrees of Doctor of Podiatry from accredited schools and are engaged in the practice of podiatry.

(4) Nurses who are graduates of accredited schools and possess nursing registration in a state or territory of the United States or the District of Columbia.

(5) Nurses on active duty in federal service with approval of the wing medical officer who will prescribe such duty.

(6) Physician assistants who are graduates of accredited schools and who are either certified by the National Commission on Certification of Physician Assistants, currently licensed in the state or territory of residence and membership, or serve as physician assistants on active duty

in federal service with approval of the wing medical officer who will prescribe such duty.

b. Must be trained in cardiopulmonary resuscitation techniques and hold a current certification by the American Red Cross or the American Heart Association.

4. Qualification as Nurse:

a. Registered Nurse. Must meet the qualifications listed in 3a(4) or (5) above, be trained in cardiopulmonary resuscitation techniques, and hold a current certification by the American Red Cross or the American Heart Association.

b. Licensed Practical Nurse or Licensed Vocational Nurse. Must possess a certificate or diploma from an accredited school and be currently licensed in the state or territory of residence and membership. Also must be trained in cardiopulmonary resuscitation techniques and hold a current certification by the American Red Cross or the American Heart Association.

5. Qualifications of Physician Assistant: Must meet the qualifications listed in 3a(6) above, be trained in cardiopulmonary resuscitation techniques, and hold a current certification by the American Red Cross or the American Heart Association.

6. Qualifications of Paramedics and Emergency Medical Technicians (EMTs):

a. Paramedic. Must have satisfactorily completed an approved DOT course of study or equivalent and either possess current certification from the National Registry of Emergency Medical Technicians or be currently licensed in the state or territory of residence and membership.

b. EMT. Must have completed the basic 81-hour DOT training course or equivalent, and either possess current certification from the National Registry of Emergency Medical Technicians or be currently licensed in the state or territory of residence and membership.

7. Qualifications of Medical Services Officer. Must hold a certification or previous military rank in medical administration, registered medical librarian, or technician from a source of accredited training.

8. Duties of Medical Personnel. CAP medical personnel are responsible for advising CAP commanders and units on the health, sanitation, and hygiene of CAP members relevant to CAP activities, with particular emphasis on those members involved in emergency services and disaster relief activities; field exercises; encampments; and special activities. They

shall also:

- a. Provide training in first aid and emergency lifesaving measures to include medically recognized cardiopulmonary resuscitation (CPR) techniques.
- b. Provide bloodborne pathogen protection training including preventive measures.
- c. Report bloodborne pathogen exposures and ensure that those members exposed obtain appropriate follow-up medical care from non-CAP sources. See CAPR 62-2 for reporting procedures.
- d. Advise members to obtain necessary physical examinations from their personal physicians and to complete emergency treatment consent forms where required by regulation to participate in various CAP activities. NOTE: Under no circumstances will CAP medical personnel perform physical examinations as part of their CAP duties.
- e. Arrange for necessary medical training materials, supplies, and equipment for unit missions or special activities.
- f. Maintain first aid kits for medical emergencies. (See paragraph 1 for emergency treatment policy.)
- g. Generally advise commanders and unit personnel on preventive medicine matters relevant to CAP activities.

OFFICIAL

Signed

WILLIAM M. HENDRIX., SR., Major, USAF
Director of Administration

9. Limitation of Medical Duties. Except in emergency situations involving life or death or routine first aid, CAP medical personnel may not as a part of their CAP duties provide active medical care to any one which could be construed as patient care or the practice of medicine. This includes, but is not limited to, prescribing and/or administering drugs and giving or supervising immunizations or physical exams.

10. Initial Appointment and Promotion. CAP Regulation 35-5 prescribes appointment and promotion procedures for medical personnel.

11. Uniforms and Insignia:

- a. Medical personnel are not required to wear a uniform, but when the uniform is worn, it will be worn as prescribed by CAPM 39-1. Any CAP uniform, including the CAP blazer combination and jumpsuit, or appropriate civilian attire may be worn.
- b. Medical insignia, badges, and certification patches are prescribed in CAPM 39-1.

RONALD T. SAMPSON, Colonel, USAF
Executive Director

WARREN J. BARRY, Brigadier General, CAP
National Commander

SUMMARY OF CHANGES

This revision adds Doctors of Chiropractic as individuals qualified to serve as CAP medical officers (para 2a(3)); limits the responsibilities of medical personnel to advising the commander on medical matters (para 8), providing emergency medical training (para 8a), providing bloodborne pathogen training (para 8b); reporting bloodborne pathogen exposure and obtaining follow-up care (para 8c); prohibits performance of physical examinations (para 8d); precludes medical personnel from any activity that may be construed as patient care (para 9); and deletes the authorization to wear standard AF white medical uniforms and the position of CAP flight surgeon.